Idealized Design of Perinatal Care

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Reliability in Healthcare

Patients get the intended tests, medications, information and procedures at the appropriate time and in accordance with their values and preferences (the “what” and “how” care is delivered).

IHI Idealized Design Projects

- Comprehensive redesign
- Enable system to perform substantially better in the future
- Achieve a new level of safer, more effective care
- Minimize risks identified in malpractice cases
- 3 prior projects (clinical office practice, medication systems, ICU)

Idealized Perinatal Care

- Develop reliable clinical processes to manage L&D
- Use principles that improve patient safety (i.e. prevent, detect and mitigate errors)
- Establish prepared and activated care teams which communicate
- Focus on mother and family as the locus of control during L&D

Adverse Events in L&D

Failures of communication

Documentation of care

Components

"Family-Centered Care"

- Prepared and activated mother/family
- Patient preferences
- Productive communication between family and care team

Components

"TeamSTEPPS"

- High-functioning care teams (prepared and activated)
- Reliable processes to prevent, detect and mitigate problems
- Stabilized mother/baby

Components

“Perinatal Outcomes”

- Reliable processes to evaluated and manage L&D (perinatal “bundles”)
- An appropriate infrastructure that underlies the system of care

Outcome Design Targets

- Reduce birth trauma to 3.3 per 1000 live births (neonatal injury defined by AHRQ Patient Safety Indicator).
- Patients state that 95% of the time their wishes are known and respected by team.
- Perinatal units report 50% improvement in culture survey scores.
- All claims defended because they meet institution’s standards for defense.

“Bundles”

A group of evidence-based interventions related to a disease of care process that, when executed together, result in better outcomes than when implemented individually.

Perinatal Bundles

- Elective induction
  - Assess gestational age
  - Monitor FHT
  - Pelvic assessment
  - Monitor/manage hyperstimulation
- Augmentation
  - Estimated fetal weight
  - Monitor FHT
  - Pelvic assessment
  - Monitor/manage hyperstimulation

Other bundles to consider

- Management and documentation of:
  - Shoulder dystocia
  - Cesarean delivery

IHI's Web and Action

- Three-part 90 minute web-based audio seminar
  - October 25 (Elective Induction and Augmentation Bundles)
  - Nov 14 (Implementing the Bundles)
  - Dec 5 (Ensuring Reliability Implementation)
- Action periods occur between calls
- Participants are expected to submit results to IHI-faculty
- Enrollment fee is $595/facility which includes
  - One web/telephone connection, one set of handout materials with unlimited participants at site
  - No travel costs necessary.
- Facilities participating: TAMC, MAMC, BAMC/WHAFMC, WRAMC/Bethesda, Portsmouth, Bremerton,San Diego

http://www.ihi.org/IHI/Programs/ConferencesAndTraining/PerinatalWebandACTION.htm

Summary

- Family-Centered Care
  - Metric: Patient appointing in the clinic to improve continuity of care
- TeamSTEPPS
  - Metric: Twice daily team checkout with standard format
- Standardized perinatal bundles with prospective outcome data collection
  - Metric: Compliance with elective induction and augmentation bundles

All focused and funded through a perinatal collaborative network (consider JTTR model)

Key principles to creating safer systems

- Communicate with patients/families
- Make the right thing the easy thing
- Standardize to reduce variation
- Enhance teamwork
- Design tasks around people's strength and professional skills